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## ***DC Fire & EMS Patient Care Policies: Patient Restraint***

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**Note Well:** *Patient restraints (physical and/or chemical) should be utilized only when necessary and in those situations where the patient is exhibiting behavior that the EMT believes presents a danger to the patient and/or others. This procedure is not to be used on patients specifically refusing treatment unless they are placed under a police hold or after Medical Control consult. This procedure applies to patients being treated under implied consent.*

*A prehospital provider must monitor the restrained patient constantly, including vital signs every 5 minutes.*

### ***I. Physical Restraints Guidelines***

1. Use the minimum physical restraint required to accomplish necessary patient care and ensure safe transportation:
  - A. Soft restraints may be sufficient.
  - B. If law enforcement or additional personnel are needed, call for it prior to attempting restraint procedures.
  - C. Do not endanger yourself or your crew.
2. Avoid placing restraints in such a way as to preclude evaluation of the patient's medical status (airway, breathing, and circulation). Consider whether placement of restraints will interfere with necessary patient care activities or will cause further harm.
3. Do not hesitate to request additional personnel, including the Metropolitan Police, as needed to stabilize the situation.

**Note Well:** *Always Pre-Notify the Receiving Facility of Any Patient that Required Restraints*

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### ***II. Physical Restraints Procedure***

1. Ensure sufficient personnel are present to control the patient while restraining him/her; ***Use Law Enforcement Assistance When Available.***
2. Place patient face up on long backboard.
3. Secure ALL extremities to backboard.
  - A. Try to restrain lower extremities first using Flexcuffs® (or equivalent) around both ankles.
  - B. Next, restrain the patient's arms at the side using one Flexcuff® (or equivalent) on each wrist.
4. If necessary, use cervical spine precautions (tape, foam bags, etc.) to control violent head or body movements.
5. Place padding under patient's head and wherever else needed to prevent the patient from further harming him/herself or restricting circulation.
6. Secure the backboard onto the stretcher for transport using additional straps if necessary; remember to secure additional straps to the upper part of the stretcher to avoid restricting the wheeled carriage.
7. Document circulatory status of restrained extremities every 15 minutes on the Patient Care Report.



**Note Well:** *Physical restraint (may be soft restraints) **must** be used any time a potentially violent or unstable patient (i.e., head injury, altered mental status for **any** reason, or patient under the influence of intoxicants) is transported by air ambulance.*